REQUEST FOR PATENT FEE REFUND				
Date of Request: 8-13-04 2 Serial/Patent # 69/933, 602				
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
Filing			\$	
Amendment			\$	
Extension of Time			\$	
Notice of Appeal/Appeal	4	4/23/04	\$ 950,00	
Petition			\$	
Issue			\$	
Cert of Correction/Terminal Dis	sc.		\$	
Maintenance			\$	
Assignment			\$	
Other			\$	
		7 TOTAL AMOUNT \$ 950.00		
	8 TO BE	a TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
Overpayment		Credit Deposit A/C #:		
Duplicate Payment	9	909-0458		
No Fee Due (Explanation):				
Response timely filed - no Extransion required				
11 REFUND REQUESTED BY:				
SIGNATURE: Derek L. MOOCLS TITLE: Afforme y &				
SIGNATURE: Neuk Juva do PHONE: 305-0014 E				
OFFICE: Refitions  COCCOCCOCCCCCCCCCCCCCCCCCCCCCCCCCCCC				
Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:				

Office of Finance Refund Branch Crystal Park One, Room \$02B